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DIVISIONAL PATENT APPLICATION TRANSMITTAL UNDER 37 C.F.R. § 1.53(b)

Attorney Docket Number	50026/025002
Applicant	Tokusumi et al.
Title	PARAMYXOVIRUS VECTORS USED FOR TRANSFER OF FOREIGN GENES

PRIORITY INFORMATION:

This application is a divisional of U.S. Application No. 09/702,498, filed October 31, 2000, which claims priority to Japanese Application Number JP2000/152726, filed May 18, 2000.

SMALL ENTITY STATUS:

☐ Applicant claims small entity status under 37 C.F.R. § 1.27.

APPLICATION ELEMENTS:

Cover sheet	1 page
Specification	26 pages
Claims	2 pages
Abstract	1 page
Drawings	7 sheets
Combined Declaration and Power of Attorney, which is: <input type="checkbox"/> Unsigned; <input type="checkbox"/> Newly signed for this application; <input checked="" type="checkbox"/> A copy from prior application 09/702,498 and the entire disclosure of the prior application is considered as being part of the disclosure of this new application and is hereby incorporated by reference therein.	3 pages
Sequence Statement	2 pages
Sequence Listing on Paper	8 pages
Sequence Listing on Diskette	0 disk
Preliminary Amendment	3 pages
Information Disclosure Statement	0 pages
Form PTO 1449	0 pages
Cited References	0 references
Recordation Form Cover Sheet and Assignment	0 pages

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English Translation	0 pages
Certified Copy of Priority Document	0 pages
Non-publication Request under 35 U.S.C. § 122(b).	0 pages
Request for Deferral of Examination under 37 C.F.R. § 1.103(d)	0 pages
A Small Entity Statement	0 pages
Return Receipt Postcard	1
FILING FEES:	
Basic Filing Fee: \$770/\$385	\$770.00
Excess Claims Fee: (4 claims-20) x \$18/\$9	\$0.00
Excess Independent Claims Fee: (1 independent Claims-3) x \$86/\$43	\$0.00
Multiple Dependent Claims Fee: \$290/\$145	\$0.00
Total Fees:	\$770.00
<input checked="" type="checkbox"/> Enclosed is a check for \$ 770.00 to cover the total fees. <input type="checkbox"/> Charge [**AMOUNT**] to Deposit Account No. 03-2095 to cover the total fees. <input type="checkbox"/> The filing fee is not being paid at this time. <input checked="" type="checkbox"/> Please apply any other charges or any credits to Deposit Account No. 03-2095.	
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